

CLAIMS ONLY						Application Number 09/744,750	Filing Date					
						Applicant(s)						
						* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51					
2		1					52					
3			1				53					
4		1					54					
5							55					
6							56					
7							57					
8							58					
9	1						59					
10	X						60					
11		1					61					
12			1				62					
13	X						63					
14							64					
15							65					
16							66					
17							67					
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43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	3						Total Indep					
Total Depend	8						Total Depend					
Total Claims	11						Total Claims					